

The evidence is in...



 **smith&nephew**
TRIGEN[®]
INTERTAN[®]
Intertrochanteric Antegrade Nail



Lower

risk of implant failure
and reoperation



Faster

time to fracture union

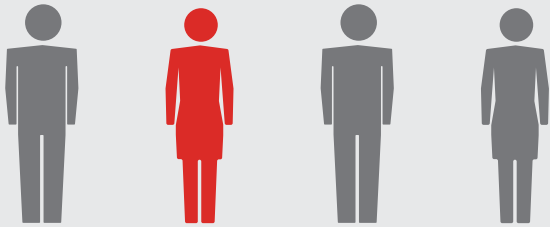


High

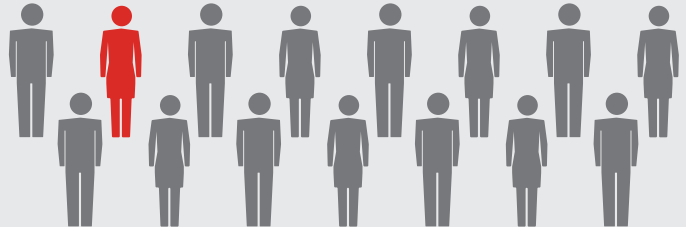
return to pre-fracture status

How satisfied are you with current hip fracture outcomes?

Around **1 in 4** hip fracture patients over the age of 65 die within 12 months¹



Around 6.6% will require **reoperation** due to complications¹⁵



And for those who survive:



50%

live with reduced ability to walk following fracture union¹

29%

decline in fine motor skills³

39%

decline in self-reported health³

53%

decline in mobility³

51%

decline in daily living activities³

Your patients can enjoy life after a hip fracture

The evidence is in! Based on data from more than two-dozen published studies, the TRIGEN[®] INTERTAN[®] Intertrochanteric Antegrade Nail allows patients to experience:



Lower

risk of implant failure and reoperation



Faster

time to fracture union



High

return to pre-fracture status



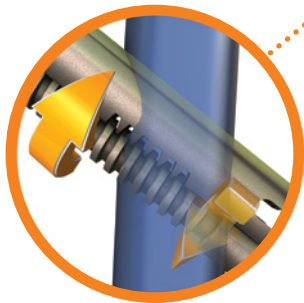


Here's how it works



Maintain compression and eliminate Z-effect

Integrated screws thread together to generate push/pull forces that hold compression after instruments are removed and eliminate Z-effect

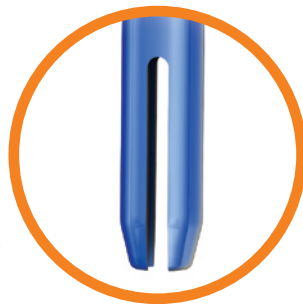


Control rotation during reduction

A worm gear mechanism converts rotation to active linear compression while stabilizing the medial fragment

Prevent periprosthetic fractures

A clothes pin distal tip is less rigid to decrease the stress riser and reduce the incidence of anterior thigh pain



Intertrochanteric rotational stability

The trapezoidal shape provides a pressfit in the metaphyseal region and positions more material on the lateral side of the nail where tensile/stretching forces tend to be greatest



Eliminate medial migration

The head of the compression screw pushes medially against the nail and unloads stress forces off the lateral wall





Challenge:
Postoperative complications

4% – 16% complication rates after proximal femur fractures^{2,6-7,19}



The TRIGEN[®] INTERTAN[®] solution:

Lower risk
of implant failure
and reoperation^{4-5,8,13-15,17,22,24-26,28}

More than
4x lower
rate of
reoperation

**TRIGEN
INTERTAN**

**All other
hip fracture
treatments***

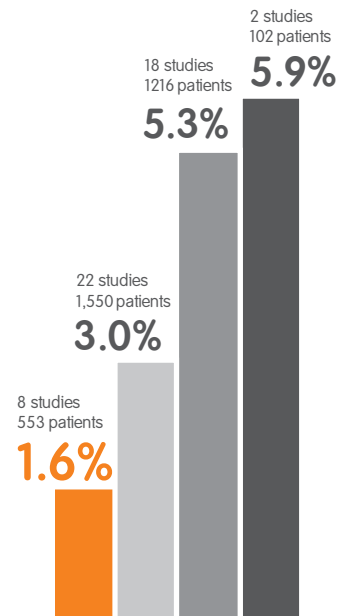
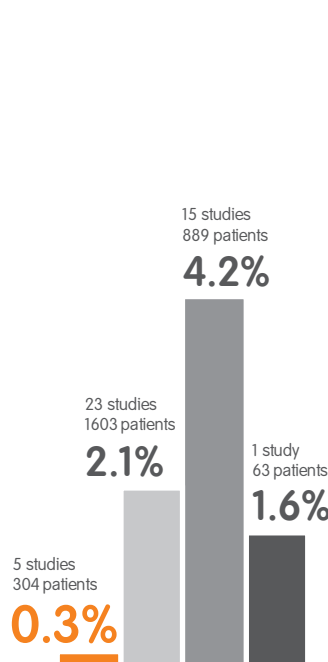
average **1.5%**^{4-5,8,13-14,17,22,24-26,28}

average **6.6%**¹⁵

*In a systematic review of 19 randomized control trials (since 1999)

TRIGEN INTERTAN compared to two large meta-analyses
of Gamma3 and Sliding Hip Screw (SHS):

■ TRIGEN INTERTAN Multiple studies*
■ SHS Yu et al**
■ Gamma3 Yu et al**
■ SHS Ma et al***



Lower
fixation failures

Lower
nonunion rate

Lower
cutout occurrence

*10 trials enrolling 985 patients^{4-5,8,12,17,22,24-26,28}

**43 trials enrolling 6,911 patients²⁷

***14 trials enrolling 2,003 patients¹⁰



Lower risk of implant failure and reoperation



Challenge:
Varus collapse

Varus collapse of the femoral head and neck



Lag screw cutout



Revision surgery

The TRIGEN[®] INTERTAN[®] solution:

Significantly less varus collapse^{6,16,21}

84% less

initial rotation and varus collapse⁶

In a biomechanical simulated gait study comparing TRIGEN INTERTAN and Gamma3

2.5x less

varus collapse when compared to the single screw device²¹

In a retrospective clinical study comparing TRIGEN INTERTAN and Gamma3



Challenge:
Peri-implant fractures

Rigid distal tip



Secondary shaft fractures at the distal tip of the nail



Revision surgery

The TRIGEN INTERTAN solution:

Low risk of secondary femoral fractures with the use of a short nail^{17,26}

Effective

in reducing the potential role of the tip of the short nail as a stress riser²⁶

Quote taken from a single prospective comparative study

No

femoral shaft fractures¹⁷

In a single study with radiographic analysis of the TRIGEN INTERTAN nail at healing



Disclaimer: The results of in vitro simulation testing have not been proven to predict clinical performance.



Challenge:
**Delayed healing
and non-unions**

Insufficient
stabilization



Excessive
micromotion of
the fracture site



Delayed
healing and
non-union



The TRIGEN[®] INTERTAN[®] solution:

Faster time to fracture union^{5,8-9,17,20,22-24,26,28}

Fracture
union up to
**3 weeks
faster**

TRIGEN
INTERTAN

Literature



average **13.8 weeks**^{8,17,22,24,26,28}

up to **17 weeks**^{5,8-9,17,20,22-24,26,28}

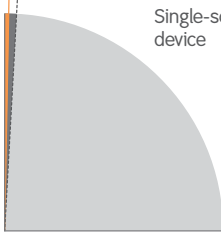
Simulated gait

0.3°

TRIGEN
INTERTAN

1.7°

Single-screw
device



5x greater

initial rotational stability⁶

In a biomechanical simulated gait study
comparing TRIGEN INTERTAN and Gamma3

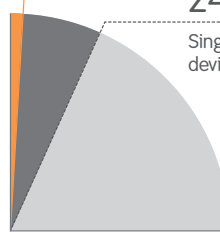
Simulated chair rise

3.2°

TRIGEN
INTERTAN

24.5°

Single-screw
device



7x less

femoral head rotation¹⁶

In a biomechanical simulated chair rise study
comparing TRIGEN INTERTAN and Gamma3

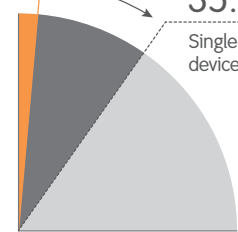
Simulated chair rise

5.5°

TRIGEN
INTERTAN

35.4°

Single-screw
device



7x reduction

in maximum femoral
head rotation¹⁶

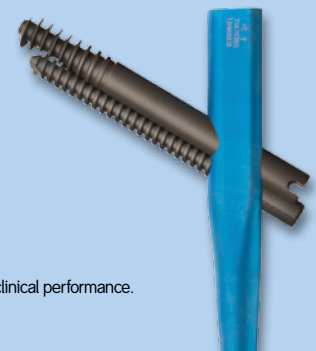
In a biomechanical simulated chair rise study at
the end of 4x body weight loading or until failure

No non-unions

in radiographic
analysis of the

TRIGEN INTERTAN nail^{5,17,26}

In three clinical studies
of the TRIGEN INTERTAN nail



Disclaimer: The results of in vitro simulation testing have not been proven to predict clinical performance.



Challenge:
Femoral neck shortening

Femoral neck shortening



Decreases the moment arm of the abductors



Reduced patient function¹⁸

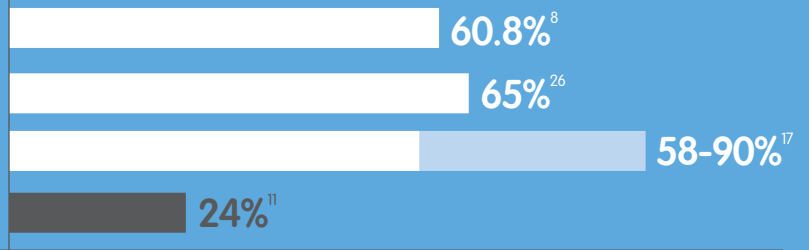


The TRIGEN[®] INTERTAN[®] solution:

High return to pre-fracture status^{5,8,12,17,22,24,26,28}

Return to **pre-fracture** ambulatory status

TRIGEN INTERTAN



*Based on a single prospective study of 594 patients



Statistically **significant improvement** in post-operative pain and mobility¹⁷

In a single prospective study of the TRIGEN INTERTAN

Low incidence of femoral neck shortening^{17,18,21-22}

2x less femoral neck shortening²¹

In a retrospective, comparative clinical study of TRIGEN INTERTAN compared to Gamma3

Less screw backup, femoral shortening, and varus collapse²²

In a prospective, randomized clinical study of TRIGEN INTERTAN compared to PFNA

No uncontrolled collapse of the neck¹⁷

In a single prospective study with radiographic analysis of the TRIGEN INTERTAN nail at healing

References:

1. American Academy of Orthopaedic Surgeons. Hip fractures in seniors: a call for health system reform. Position Statement 1144. Rosemont, IL: 1999.
2. Baumgaertner M, Solberg B. Awareness of tip-apex distance reduces failure of fixation of trochanteric fractures of the hip. *J Bone Joint Surg Br*. 1997;79:969-971;
3. Bentler SE, Liu L, Obrizan M, Cook EA, Wright KB, Geweke JF, et al. The aftermath of hip fracture: discharge placement, functional status change, and mortality. *Am J Epidemiol*. 2009 Nov 15;170(10):1290-9. doi: 10.1093/aje/kwp266.
4. Erez O, Dougherty PJ. Early complications associated with cephalomedullary nail for intertrochanteric hip fractures. *The journal of trauma and acute care surgery*. Feb 2012;72(2):E101-105.
5. Galli M, Ciriello V, Bocchino L, Gangemi NM, Peruzzi M, Marzetti E. Clinical and functional outcomes of internal fixation with intertrochanteric antegrade nail in older patients with proximal extracapsular femoral fractures. *Eur J Trauma Emerg Surg*. 2013/10/17 2013:1-6.
6. Hoffmann S, Paetzold R, Stephan D, Püschel K, Buehren V, Augat P. Biomechanical evaluation of interlocking lag screw design in intramedullary nailing of unstable pertrochanteric fractures. *J Orthop Trauma*. 2013;27(9):483-490.
7. Hsueh KK, Fang CK, Chen CM, et al. Risk factors in cutout of sliding hip screw in intertrochanteric fractures: an evaluation of 937 patients. *Int Orthop*. 2010;34:1273-1276;
8. Kim JW, Kim TY, Ha YC, Lee YK, Koo KH. Outcome of intertrochanteric fractures treated by intramedullary nail with two integrated lag screws: A study in Asian population. *Indian J Orthop*. Jul-Aug 2015;49(4):436-441.
9. Liu Y, Tao R, Liu F, Wang Y, Zhou Z, Cao Y, et al. Mid-term outcomes after intramedullary fixation of pertrochanteric femoral fractures using the new proximal femoral nail antirotation (PFNA). *Injury* 2010;41:810-7. [http:// dx.doi.org/10.1016/j.injury.2010.03.020](http://dx.doi.org/10.1016/j.injury.2010.03.020).
10. Ma KL et al. Proximal femoral nails antirotation, Gamma nails, and dynamic hip screws for fixation of intertrochanteric fractures of femur: A Meta-Analysis. 2014. *Orthopaedics & traumatology: Surgery and Research* 100, 859-866.
11. Magaziner J, Fredman L, Hawkes W, Hebel JR, Zimmerman S, Orwig DL, Wehren L. Changes in functional status attributable to hip fracture: a comparison of hip fracture patients to community-dwelling aged. *Am J Epidemiol*. 2003; 157:1023-31.
12. Matre K, Vinje T, Havelin LI, et al. TRIGEN INTERTAN intramedullary nail versus sliding hip screw: a prospective, randomized multicenter study on pain, function, and complications in 684 patients with an intertrochanteric or subtrochanteric fracture and one year of follow-up. *The Journal of bone and joint surgery. American volume*. Feb 6 2013;95(3):200-208.
13. Mir HR, Edwards P, Sanders R, Haidukewych G. Iatrogenic displacement of minimally or nondisplaced intertrochanteric fractures during intramedullary fixation: incidence, potential etiologies, and clinical impact. *Current Orthopaedic Practice*. 2013;24(11):58-63.
14. Mir HR, Edwards P, Sanders R, Haidukewych G. Results of cephalomedullary nail fixation for displaced intracapsular femoral neck fractures. *Journal of orthopaedic trauma*. 2011;25(12):714-720.
15. Mundi S et al. Similar mortality rates in hip fracture patients over the past 31 years: A systematic review of RCTs. *Acta Orthopaedica* 2014; 85(1): 54-59.
16. Nayak A, Smithson I, Cooper S, Cox J, Marberry S, Santoni BG, et al. Comparison of femoral head rotation and varus collapse between a single and integrated dual screw intertrochanteric hip fracture fixation device using a chair rise biomechanical model. Abstract presented at: Orthopaedic Trauma Association Annual Meeting; October 15-18, 2014; Tampa, FL, USA.
17. Ruecker AH, Rupprecht M, Gruber M, Gebauer M, Barvencik F, Briem D, et al. The treatment of intertrochanteric fractures: results using an intramedullary nail with integrated cephalocervical screws and linear compression. *J Orthop Trauma* 2009;23:22-30.
18. Rueger J, Moore C. Shortening of the femoral neck following pertrochanteric fracture. *Bone Joint Sci*. 2011 May;2(5).
19. Rupprecht M, Grossterlinden L, Ruecker AH, et al. A comparative biomechanical analysis of fixation devices for unstable femoral neck fractures: the Intertan versus cannulated screws or a dynamic hip screw. *J Trauma*. 2011;71:625-634
20. Sahin EK, Imerci A, Kinik H, Karapinar L, Canbek U, Savran A. Comparison of proximal femoral nail antirotation (PFNA) with AO dynamic condylar screws (DCS) for the treatment for unstable pertrochanteric femoral fractures. *Eur J Orthop Surg Traumatol* 2014;24:347-52.
21. Serrano-Riera R, Blair JA, Downes K, Sanders R. Cephalo-medullary nail fixation of intertrochanteric fractures: are two proximal screws better than one? Abstract presented at: Orthopaedic Trauma Association Annual Meeting; October 15-18, 2014; Tampa, FL, USA.
22. Seyhan M, Turkmen I, Unay K, Ozkut AT. Do PFNA devices and Intertan nails both have the same effects in the treatment of trochanteric fractures? A prospective clinical study. *J Orthop Sci*. Nov 2015;20(6):1053-1061.
23. Tao R, Lu Y, Xu H, Zhou ZY, Wang YH, Liu F. Internal fixation of intertrochanteric hip fractures: a clinical comparison of two implant designs. *Sci World J* 2013;2013:1-8.
24. Wang Q, Yang X, He HZ, Dong LJ, Huang DG. Comparative study of InterTAN and Dynamic Hip Screw in treatment of femoral intertrochanteric injury and wound. *International journal of clinical and experimental medicine*. 2014;7(12):5578-5582.
25. Wu D, Ren G, Peng C, Zheng X, Mao F, Zhang Y. InterTan nail versus Gamma3 nail for intramedullary nailing of unstable trochanteric fractures. *Diagnostic pathology*. 2014;9:191
26. Wu Y, Watson JT, Kuldjanov D, Jackman J. Rotationally stable fixation for intertrochanteric hip fractures: the Intertan experience, surgical technique, and outcomes. *Techniques in Ortho*. 2014; 29;3:120-132
27. Yu J et al. Internal fixation treatments for intertrochanteric fracture: a systematic review and meta-analysis of randomized evidence. *Nature Scientific Reports*. 2015.
28. Zhang S, Zhang K, Jia Y, Yu B, Feng W. InterTan nail versus Proximal Femoral Nail Antirotation-Asia in the treatment of unstable trochanteric fractures. *Orthopaedics*. Mar 2013;36(3):e288-294.

Supporting healthcare professionals for over 150 years

Smith & Nephew, Inc.
1450 Brooks Road
Memphis, TN 38116
USA

www.smith-nephew.com

Telephone: 1-901-396-2121
Information: 1-800-821-5700
Orders/Inquiries: 1-800-238-7538

®Trademark of Smith & Nephew.

©2016 Smith & Nephew, Inc.
05036 V1 06/16